POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	Dr	·	2-28-00	
O.I.P.E. CLASSIFIER		4/3	3/9/60	
FORMALITY REVIEW	13+1	Coves	4-10-00	
RESPONSE FORMALITY REVIEW	16-11	weres	4.13-00	

## INDEX OF CLAIMS

Rejected	N Non-elected
= Allowed	I Interference
(Through numeral) Canceled	A Appeal
± Restricted	O Objected

÷ Restricted 0 Objected							
Claim	Claim	Date	Claim	Date			
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1 46	96	<del></del>	147	<del></del>			
1 48	98	<del></del>	148	<del>-                                      </del>			
1 48 49	99	+	149				
50	100		150				

If more than 150 claims or 10 actions staple additional sheet here